

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org



RECEIVED

SIA

'05 FEB -3 A10:37

STATE OF HAWAII LITATE ETHIOS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(.),00 01.111	it oloaity)		
PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
MORRIS	GEORGE "RED"	Α.	808/531-4551	
MAILING ADDRESS (Street)			FAX	
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601	
(City)	(State)	(Zip Code)		
HONOLULU	HAWAII	96813-2453		
EMPLOYING ORGANIZATION (Fill in	only if you are employed by a business entit	y which has been retained to lobby)	TELEPHONE	
G.A. MORRIS, INC.			808/531-4551	
MAILING ADDRESS (Street)	With	1111	FAX	
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601	
(City)	(State)	(Zip	Code)	
HONOLULU	HAWAII		96813-2453	

PART II ORGANIZATION	N		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		Telephone 212-720-0611	
SECURITIES INDUSTRY ASSOC			
MAILING ADDRESS (Street)	FAX 212-608-1604		
, ,			
120 BROADWAY, 35 TH FLOOR			
(City)	(State)	(Zip Code)	
(City)	(Glate)	(Zip 6646)	
NEW YORK	NY	10271	
NAME OF PERSON RESPONSIBLE	TELEPHONE 808-531-4551		
MELODY BUTAY DACANAY			
MICEOST BOTTOT BROKEN			
MAILING ADDRESS (Street)	FAX 808-533-4601		
222 SOUTH VINEYARD STREET			
222 SOUTH VINETARD STREET			

(City)	(State)	(Zip Code)				
HONOLULU	Hí	96813-2453				
PART III DESCRIPTION	OF SUBJECTS UPON WHICH	YOU EXPECT TO LOBBY				
[] Agriculture	[] Education	[] Human Services	[] Science, Technology & Economic Development			
[] Communications & Public Utilities	[X] Government Operations & Finance	[X] Intergovernmental Relations, International Affairs	[] Tourism & Recreation			
[X] Consumer Protection & Commerce	[] Hawaiian Affairs	[] Labor & Employment	[] Transportation			
[] Culture, Arts, Historic Preservation	[] Health	[] Planning, Land & Water Use Management	[] Other: (indicate below)			
[] Ecology, Energy Environmental Protection	[] Housing	[] Public Safety & Corrections				
PART IV CERTIFICATION OF LOBBYIST						
I hereby certify that the	e information furnished above i	s, to the best of my knowledge,	correct and complete.			
	(Signature of Lobbyist)		(Date)			
PART V AUTHORIZATION	ON TO LOBBY					
NAME		TITLE OF AUTHORIZING OFFICE	R OR PERSON REPRESENTED			
KIM CHAMBERLAIN	VICE PRESIDENT & COUNSEL					

(State) NY

(Signature of Authorizing Officer or Person Represented)

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

NAME OF ORGANIZATION (if applicable)

SECURITIES INDUSTRY ASSOCIATION

MAILING ADDRESS (Street)

(City)

NEW YORK

120 BROADWAY, 35TH FLOOR

TELEPHONE 212-720-0611

FAX 212-608-1604

(Zip Code)